

JCS42 U.8.ero  
09/17/39

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AT		1-13-00
O.I.P.E. CLASSIFIER		10	2/10
FORMALITY REVIEW	BS	64934	2/8/00
RESPONSE FORMALITY REVIEW	EM	64934	3/9/00

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here